



Montgomery County Maryland
Department of Permitting Services
(240) 777-6300 Fax (240) 777-6262
<http://permittingervices.montgomerycountymd.gov>



Request for Septic System Location

CASE # _____

For information on the location and design specifications of an existing septic system please provide the following information on the property as best as possible:

Property address: _____
Address City State Zip Code

Lot: _____ Block: _____ Subdivision Name: _____

Tax Map: _____ Parcel: _____ Tax Account #: _____

Date structure was built: _____ Septic installation date: _____

Name of original septic permit applicant: _____

Is this an emergency (please check box that applies): ☐ Yes ☐ No

Please send any information found via: ☐ Fax **OR** ☐ Mail

Applicant's name: _____ Fax number: _____

Applicant's address: _____
Address City State Zip Code

Telephone number: _____ Email: _____

Please note that the Well and Septic Office does not have file information for every septic system in the county. Information on septic systems installed prior to 1979 will likely be filed by the name of the original permit applicant. Please be sure to provide that information if possible.

Please also note that it takes time for our staff to search the old files for this information. The information is not currently computerized. The response time for the information requested will be approximately two weeks.

OFFICE USE ONLY

Date Received by Well and Septic: _____ Date Out: _____ Processed By: _____